

## World AIDS Day – December 1

Medicare provides coverage of both standard and Food and Drug Administration approved rapid Human Immunodeficiency Virus (HIV) screening tests as follows:

- Once annually for beneficiaries at increased risk for HIV infection (11 full months must elapse following the month the previous test was performed in order for the subsequent test to be covered), and
- A maximum of three times per term pregnancy for pregnant Medicare beneficiaries beginning with the date of the first test when ordered by the woman's clinician, at the following times:
  - When the diagnosis of pregnancy is known,
  - During the third trimester; and
  - At labor, if ordered by the woman's physician.

Beneficiaries with any known prior diagnosis of HIV-related illness are not eligible for this screening test. Medicare provides coverage for HIV screening as a Medicare Part B benefit. There is no coinsurance or copayment or Medicare part B deductible for this benefit.

### *Resources from the MLN*

- For detailed coverage and eligibility information, please refer to the MLN [“Human Immunodeficiency Virus Screening”](#) brochure.
- Medicare also covers Sexually Transmitted Infections (STIs) Screening and High Intensity Behavioral Counseling (HIBC) to Prevent STIs. For additional information about these services, please refer to the [“MLN Preventive Services Quick Reference Information”](#) chart.
- For more products created specifically for health care professionals about preventive services covered by Medicare, please visit the [CMS Medicare Learning Network® \(MLN\) Preventive Services](#) web page.